PART B - FEE(S) TRANSMITTAL

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7590

69/27/2007

Cory G. Claassen BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP Seventh Floor

12400 Wilshire Boulevard Los Angeles, CA 90025

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(Depositor's name Chuna (Signature) (Desc

FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO APPLICATION NO 10/743 392 12/22/2003 Uday R. Naik 42P17959 7182 TITLE OF INVENTION: OPTIMIZED BACK-TO-BACK ENQUEUE-DEQUEUE VIA PHYSICAL QUEUE PARALLELISM

APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/27/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
LOO, JU	VENA W	2609	370-412000	•			
. Change of correspondence address or indication of "Foe Address" (37 FR 1.563). — Change of correspondence address (or Change of Correspondence Address form FTO/SP122) attached. — The Address findication (or Fee Address' Indication form FTO/SP128 and Indication form FTO/SP1847; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a membor a registered attorney or agent) and the names of up to 2 registered patent altorneys or agents. If no name is listed, no name will be printed.		Taylor	Taylor & Zafman LLI	

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

Intel Corporation

Santa Clara, California

Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🕱 Corporation or other private group entity 🚨 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted)

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 02 - 2666 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date 25.129Registration No.

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